



COUNTY OF LOS ANGELES
OFFICE OF THE COUNTY COUNSEL

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ROBERT E. KALUNIAN
Acting County Counsel

August 24, 2009

TO: SACHI A. HAMAI
Executive Officer
Board of Supervisors

Attention: Agenda Preparation

FROM: JOHN F. KRATTL 
Senior Assistant County Counsel

RE: **Shomari Glass, et al. v. County of Los Angeles**
Los Angeles Superior Court Case No. MC 108 327

Attached is the Agenda entry for the Los Angeles County Claims Board's recommendation regarding the above-referenced matter. Also attached are the Case Summary, the Summary Corrective Action Plan, and the Corrective Action Plan to be made available to the public.

It is requested that this recommendation, the Case Summary and the Summary Corrective Action Plan be placed on the Board of Supervisor's agenda.

JFK:rfm

Attachments

Board Agenda

MISCELLANEOUS COMMUNICATIONS

Los Angeles County Claims Board's recommendation: Authorize settlement of the matter entitled Shomari Glass, et al. v. County of Los Angeles, Los Angeles Superior Court Case No. MC 108 327, in the amount of \$550,000 plus the assumption of the remaining Medi-Cal lien in the amount of \$73,376 and instruct the Auditor-Controller to draw a warrant to implement this settlement from the Fire Department's budget.

This lawsuit concerns emergency medical treatment provided by Los Angeles County Fire Department paramedics.

CASE SUMMARY

INFORMATION ON PROPOSED SETTLEMENT OF LITIGATION

CASE NAME	Shomari Glass v. County of Los Angeles
CASE NUMBER	MC 108327
COURT	Los Angeles Superior Court North - Lancaster
DATE FILED	July 10, 2007
COUNTY DEPARTMENT	Los Angeles County Fire Department
PROPOSED SETTLEMENT AMOUNT	\$ 550,000 plus the assumption of the remaining Medi-Cal lien in the amount of \$73,376
ATTORNEY FOR PLAINTIFF	Michael D. Weinreb, Esq.
COUNTY COUNSEL ATTORNEY	Narbeh Bagdasarian
NATURE OF CASE	<p>Shomari Glass, a 9-year-old male, had been diagnosed with asthma. On December 17, 2006, Shomari suffered a severe asthma attack. The Los Angeles County Fire Department ("LAFD") paramedics were called.</p> <p>LAFD paramedics arrived at the scene and found Shomari with no respiration and no pulse. The paramedics performed the required resuscitative measures and then transported Shomari to a hospital.</p>

Upon arrival at the hospital, it was determined that Shomari had suffered brain injury due to lack of oxygen.

Shomari Glass and his family filed a lawsuit against several defendants including the County of Los Angeles. As to the County, the plaintiffs contended that on December 17, 2006, LAFD paramedics delayed the resuscitation, thereby contributing to Shomari's brain injury.

Other defendants have settled their case with the plaintiffs. The County proposes to settle this case in the amount of \$550,000, plus the assumption of the remaining Medi-Cal lien in the amount of \$73,376.

PAID ATTORNEY FEES, TO DATE	\$	147,291.05
PAID COSTS, TO DATE	\$	54,872.13

Summary Corrective Action Plan



The intent of this form is to assist departments in writing a corrective action plan summary for attachment to the settlement documents developed for the Board of Supervisors and/or the County of Los Angeles Claims Board. The summary should be a specific overview of the claims/lawsuits' identified root causes and corrective actions (status, time frame, and responsible party). This summary does not replace the Corrective Action Plan form. If there is a question related to confidentiality, please consult County Counsel.

Date of incident/event:	December 17, 2006
Briefly provide a description of the incident/event:	A 9 y/o male suffered a severe asthma attack at home resulting in respiratory arrest. His family called 911 and LACoFD paramedics responded along with a private ambulance. The patient was found to be in full arrest with no heart beat and not breathing. CPR was begun immediately and continued throughout treatment. The patient was intubated, provided appropriate medication, transported to the hospital and the paramedics utilized a defibrillator to shock the patient's heart. The patient was resuscitated but suffered significant cognitive and motor deficits as a result of the brain injury secondary to the lack of oxygen.

1. Briefly describe the root cause of the claim/lawsuit:

The Department's root cause analysis showed no improper medical care by the paramedics in their response to this situation. This case is presented for settlement based on the opinion of County Counsel that the risk of a significant judgment against the County warranted the settlement. The Fire Department believes the case should be taken to trial given the facts of the case.

2. Briefly describe recommended corrective actions:
(Include each corrective action, due date, responsible party, and any disciplinary actions if appropriate)

Incomplete documentation of CPR on EMS form

The Department implemented a policy of review of all advanced airway EMS reports by station captains and battalion chiefs at the end of each shift. The purpose of the review is to check for accurate and complete documentation of patient care.

Implemented: 12/28/07

Responsible Party: All station captains and battalion chiefs

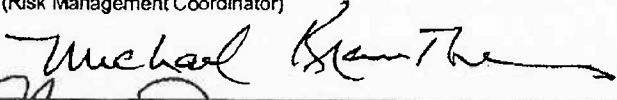
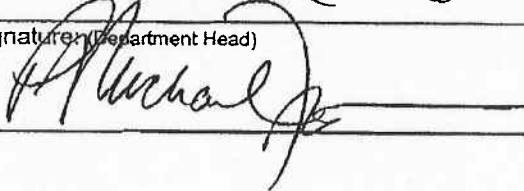
There has been an ongoing QI Airway Study by the EMS section to review all non DOA cases involving intubation.

Implemented: 2004

Responsible Party: EMS Section QI staff

3. State if the corrective actions are applicable to only your department or other County departments:
(If unsure, please contact the Chief Executive Office Risk Management Branch for assistance)

- ☐ Potentially has County-wide implications.
- ☐ Potentially has implications to other departments (i.e., all human services, all safety departments, or one or more other departments).
- X Does not appear to have County-wide or other department implications.

Signature: (Risk Management Coordinator) 	Date: August 12, 2009
Signature: (Department Head) 	Date: August 12, 2009

Corrective Action Plan



1. General Information

Date CAP document prepared:	August 13, 2009
Department:	Fire
Name of departmental contact person:	Michael Kranther
• title:	Division Chief, Risk Management
• phone number:	323/881-2379
• e-mail:	mkranther@fire.lacounty.gov

2. Incident/Event Specific Information

Date of incident/event:	December 17, 2006
Location of incident/event:	1750 E Avenue R-12, Palmdale
Event contact person:	Michael Kranther
• phone:	323/881-2379
• e-mail:	mkranther@fire.lacounty.gov
Claim adjuster: <small>(Third Party Administrator or County Counsel)</small>	Greg Abramson
• phone number:	562/492-1882
If claim is in litigation, please complete the following:	
County Counsel Attorney:	Narbeh Bagdasarian
• phone number:	213/974-1864

3. Incident/Event Description:

Nature of incident/event:	9 y/o male suffered severe asthma attack at home resulting in full arrest.
Provide a brief description of the incident/event:	A 9 y/o male suffered a severe asthma attack at home resulting in respiratory arrest. His family called 911 and LACoFD paramedics responded along with a private ambulance. The patient was found to be in full arrest with no heart beat and not breathing. CPR was begun immediately and continued throughout treatment. The patient was intubated, provided appropriate medication, transported to the hospital and the paramedics utilized a defibrillator to shock the patient's heart. The patient was resuscitated but suffered significant cognitive and motor deficits as a result of the brain injury secondary to the lack of oxygen.

- ☐ Include a copy of the supervisor's first report of incident (or related accident, event or incident investigation documentation).

4. Corrective Action Plan Problem Statement

The Department's root cause analysis showed no improper medical care by the paramedics in their response to this situation. This case is presented for settlement based on the opinion of County Counsel that the risk of a significant judgment against the County warranted the settlement. The Fire Department believes the case should be taken to trial given the facts of the case.

An incidental issue was incomplete documentation of CPR on the EMS form.

5. Root Cause Analysis

Root Cause Analysis tool used:	Evaluation by expert witnesses, defense counsel, County Counsel and the TPA.
Incident/event root causes:	None

- ☐ Include a copy of the Root Cause Analysis tool utilized (or related Root Cause Analysis documentation).

6. Corrective Action Plan Steps

Task number:	One
Task name:	Daily EMS Documentation Review
System issue:	<input checked="" type="checkbox"/> Process/procedure <input type="checkbox"/> Equipment <input checked="" type="checkbox"/> Personnel
Schedule start date:	12/28/07
Schedule completion date:	Ongoing
Responsible person:	Station Captains and Battalion Chiefs
Task description:	The Department implemented a policy of review of all advanced airway EMS reports by station captains and battalion chiefs at the end of each shift. The purpose of the review is to check for accurate and complete documentation of patient care.

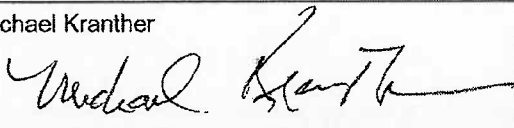
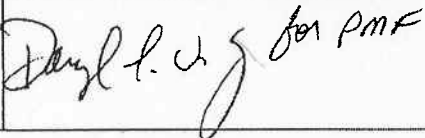
Task number:	Two
Task name:	QI Study
System issue:	<input checked="" type="checkbox"/> Process/procedure <input type="checkbox"/> Equipment <input checked="" type="checkbox"/> Personnel
Schedule start date:	2004
Schedule completion date:	Ongoing

County of Los Angeles
Corrective Action Plan

Responsible person:	EMS QI Staff
Task description:	There has been an ongoing QI Airway Study by the EMS section to review all non DOA cases involving intubation.

7. Review and Authorization

The department has reviewed the incident/event investigation, Root Cause Analysis documentation and Corrective Action Plan and has taken all appropriate corrective actions required.

Review and authorization steps:	Signature: Michael Kranther	Date: August 13, 2009
Document reviewed by department Risk Management Coordinator:	Michael Kranther 	August 13, 2009
Document reviewed by department head or designee:	 for PMF	08/14/09